

12-05-01

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JC984 U.S. PTO  
11/01/01

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PTO/SB/05 (11-00)  
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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	KAP 101 DIV
	First Inventor	Aaron V. Kaplan
	Title	METHODS AND APPARATUS FOR PERICARDIAL ACCESS
	Express Mail Label No.	EL 845500604 US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <b>13</b> ] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total <b>4</b> ] 5. Oath or Declaration [Total Pages <b>1</b> ] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
<b>ACCOMPANYING APPLICATION PARTS</b> 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: Verified Statement of Small Entity, Copy of Assignment	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP) of prior application No.: **09/397,392**

Prior application information: Examiner **M. Mendez** Group / Art Unit **3735**

For CONTINUING OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

☐ Customer Number or Bar Code Label ☒ Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	Cook, Alex, McFarron, Manzo, Cummings & Mehler				
Address	200 West Adams Street Suite 2850				
City	Chicago	State	IL	Zip Code	60606
Country	USA	Telephone	312-236-8500	Fax	312-236-8170

Name (Print/Type)	Gary W. McFarron	Registration No. (Attorney/Agent)	27,357
Signature	<i>Gary W. McFarron</i>	Date	11/01/2001

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JC955 U.S. PTO  
10/002329  
10/10/11

# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

## Complete if Known

Application Number	
Filing Date	
First Named Inventor	Aaron V. Kaplan
Examiner Name	
Group Art Unit	
Attorney Docket No.	KAP 101 DIV

TOTAL AMOUNT OF PAYMENT \$370.00

## METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 50-1039

Deposit Account Name: Cook, Alex, McFarron et al.

☒ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

☒ Applicant claims small entity status. See 37 CFR § 1.27

2. ☐ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	201	740 370	Utility filing fee	370.00	
106	206	330 165	Design filing fee		
107	207	510 255	Plant filing fee		
108	208	740 370	Reissue filing fee		
114	214	160 80	Provisional filing fee		
SUBTOTAL (1)					\$370.00

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
6	-20** = 0	X	0.00
Independent Claims	2 - 3** = 0	X	0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
103	203	18 9	Claims in excess of 20		
102	202	84 42	Independent claims in excess of 3		
104	204	280 140	Multiple dependent claim, if not paid		
109	209	84 42	** Reissue independent claims over original patent		
110	210	18 9	** Reissue claims in excess of 20 and over original patent		

SUBTOTAL (2) \$0.00

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	205	130 65	Surcharge - late filing fee or oath		
127	227	50 25	Surcharge - late provisional filing fee or cover sheet		
139	239	130 130	Non - English specification		
147	247	2,520 2,520	For filing a request for ex parte reexamination		
112	212	920* 920*	Requesting publication of SIR prior to Examiner action		
113	213	1,840* 1,840*	Requesting publication of SIR after Examiner action		
115	215	110 55	Extension for reply within first month		
116	216	400 200	Extension for reply within second month		
117	217	920 460	Extension for reply within third month		
118	218	1,440 720	Extension for reply within fourth month		
128	228	1,960 980	Extension for reply within fifth month		
119	219	320 160	Notice of Appeal		
120	220	320 160	Filing a brief in support of an appeal		
121	221	280 140	Request for oral hearing		
138	238	1,510 1,510	Petition to institute a public use proceeding		
140	240	110 55	Petition to revive - unavoidable		
141	241	1,280 640	Petition to revive - unintentional		
142	242	1,280 640	Utility issue fee (or reissue)		
143	243	460 230	Design issue fee		
144	244	620 310	Plant issue fee		
122	222	130 130	Petitions to the Commissioner		
123	223	50 50	Processing fee under 37 CFR § 1.17(q)		
126	226	180 180	Submission of Information Disclosure Statement		
581	281	40 40	Recording each patent assignment per property (times number of properties)		
146	246	740 370	Filing a submission after final rejection (37 CFR § 1.129(a))		
149	249	740 370	For each additional invention to be examined (37 CFR § 1.129(b))		
179	279	740 370	Request for Continued Examination (RCE)		
169	269	900 900	Request for expedited examination of a design application		

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

## SUBMITTED BY

Name (Print/Type): Gary W. McFarron

Signature: Gary W. McFarron

Registration No. (Attorney/Agent)

27,357

Telephone

312-236-8500

Date

11/01/2001

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**Applicant(s): Kaplan et al.**

Docket No.

**KAP 101 DIV**

Serial No.

Filing Date

**Examiner**

### Group Art Unit

Invention: **Methods and Apparatus for Pericardial Access**

I hereby certify that the following correspondence:

## Divisional Patent Application

*(Identify type of correspondence)*

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: The Assistant Commissioner for Patents, Washington, D.C. 20231 on

**November 1, 2001**

**(Date)**

**Kathrina M. Cotner**

(Typed or Printed Name of Person Mailing Correspondence)

(Signature of Person Mailing Correspondence)

**EL 845500604 US**

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